BEST AVAILABLE COPY
Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

09767328

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS								RATE	FEE]]	RATE	FEE	
FO	·R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CLAIMS	2 / minus 20=		*			X\$ 9=		OR	X\$18=		
IND	DEPENDENT CL	_AIMS	3 minus 3 =		*			X40=		1			
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT						 	OR			
* If	the difference	in column 1 is	less than ze	ero. ente	r "0" in c	olumn 2		+135=	<u> </u>	JOR	<u></u>		
		LAIMS AS A				,0.a		TOTAL	<u></u>	OR	TOTAL	728	
	<u> </u>	(Column 1)	.NICIVICU	(Colur	mn 2)	(Column 3)	a .	SMALL	ENTITY	OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				CLAIM			+135=		OR	+270=		
								TOTAL			TOTAL		
		A	ADDIT. FEE		JUN ,	ADDIT. FEE							
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colun HIGH NUME PREVIC PAID I	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X40=		OR	X80=	•	
	FIRST PRESE	ENDENI	CLAIM			+135=		OR	+270=				
								TOTAL			TOTAL		
(Column 1) (Column 2) (Column 3)								.DDIT. FEE (,	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID F	EST BER DUSLY	PRESENT EXTRA	RATE	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	- C1 A184	=		X40=		OR	X80=		
Щ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE										OR	TOTAL		
***	If the "Highest Nur	mber Previously Pa mber Previously Pa ber Previously Paid	aid For" IN THIS	S SPACE is	s less thai	n 3, enter "3."	^	DDIT. FEE			ADDIT. FEE		